Case 16-33186 Doc 1 Filed 10/18/16 Entered 10/18/16 13:06:52 Desc Main Page 1 of 33 Cument Fill in this information to identify your case: United States Bankruptcy Court for the: FILED _ District of ____ UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS Case number (If known): ___ Chapter you are filing under: Chapter 7 OCT 18 2016 Chapter 11 Chapter 12 Check if this is an ☐ Chapter 13 JEFFREY P. ALLSTRADT CELERK Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy 12/15 The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: **Identify Yourself About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 1. Your full name Write the name that is on your **CESAR** government-issued picture First name First name identification (for example, your driver's license or passport). Middle name Middle name **COELLAR** Bring your picture Last name Last name identification to your meeting with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) All other names you have used in the last 8 First name First name years Middle name Include your married or Middle name maiden names Last name Last name First name First name Middle name Middle name Last name Last name 3. Only the last 4 digits of xxx - xx - 0625 your Social Security number or federal

(ITIN)

Individual Taxpayer

Identification number

9 xx - xx -__

9 xx - xx -_____

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Debtor 1

CESAR COELLAR E

irst Name	Middle Name	Last Name

Case number (if know

	About Debtor 1:			About Debtor 2 (S	pouse Only in a Joint Case):	
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	I have not used any business names or EINs.			I have not used any business names or EINs.		
Include trade names and						
doing business as names	Business name	**************************************		Business name		
	EIN -			EIN -		
	EIN	ALTERNATION ALTERN		EIN		
Where you live				If Debtor 2 lives at	a different address:	
	5575 FIELDS DR					
	Number Street			Number Street		
	YORKVILLE		60560	NATIONAL PROPERTY AND ADMINISTRATION OF THE PROPERTY ADMINISTRATION OF THE PROPERTY AND ADMINISTRATION OF THE PROPERTY AND ADMINISTRATION OF THE PROPERTY ADMINISTRATION OF THE PROPERTY AND ADMINISTRATION OF THE PROPERTY AND ADMINISTRATION OF THE PROPERTY AND ADMINISTRATION OF THE		
	City	State	ZIP Code	City	State ZIP Co	
	KENDALL					
	County			County		
	If your mailing address above, fill it in here. Not any notices to you at this	e that the court w	the one vill send		ng address is different from b. Note that the court will send nailing address.	
	Number Street			Number Street		
	P.O. Box	***************************************		P.O. Box		
	City	State	ZIP Code	City	State ZIP Co	
Why you are choosing	Check one:	e Stransfelde e Stransfeldere verwerke in groep is energiete e diegenste	TTER DEL PROGRAMMENT AND STANDARD STANDA	Check one:	ાં ભાગમાં કહ્યું કરવા કહ્યું કરવા કહ્યું કરવા તે ત્યારા મહત્વન તે ત્યારા તે ત્યારા કરવા હતા છે. તે જિલ્લોના મહ	
this district to file for bankruptcy	Over the last 180 days I have lived in this dist other district.				days before filing this petition s district longer than in any	
	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			I have another re (See 28 U.S.C. §		
			· · · · · · · · · · · · · · · · · · ·	Workling		

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Debtor 1

CESAR E COELLAR

Middle Name

Case number (if known)_

7.	The chapter of the Bankruptcy Code you		ack one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	are choosing to file under	☑ Cha	· · · · · · · · · · · · · · · · · · ·							
	unuer	☐ Cha	oter 11							
		☐ Cha	oter 12							
		☐ Cha	oter 13							
8.	How you will pay the fee	loca you sub with	pay the entire fee when I file my petition. Please check with the clerk's office in your court for more details about how you may pay. Typically, if you are paying the fee elf, you may pay with cash, cashier's check, or money order. If your attorney is itting your payment on your behalf, your attorney may pay with a credit card or check pre-printed address.							
		☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).								
	ec	By I less pay	uest that my fee be waived (You may request this option only if you are filing for Chapter 7 my, a judge may, but is not required to, waive your fee, and may do so only if your income is than 150% of the official poverty line that applies to your family size and you are unable to the fee in installments). If you choose this option, you must fill out the Application to Have the oter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.							
9.	Have you filed for bankruptcy within the last 8 years?	No Yes.	District 12 Danthon When $09/05/14$ Case number $14-32453$ District 12 Danthon When $09/05/14$ Case number $16-13776$ District 12 Danthon When $09/05/14$ Case number $16-13776$ When $09/09/15$ Case number $16-30775$							
			District 12 DS of half when $09/05/14$ Case number $14-32453$ District 12 Do of half when $09/05/14$ Case number $16-1376$ District 12 Do of half when $09/05/15$ Case number $16-1376$ When $09/09/15$ Case number $16-3075$							
0.	Are any bankruptcy cases pending or being	☐ No								
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	-₹ Yes.	Debtor Relationship to you District When Case number, if known MM / DD / YYYY							
			Debtor Relationship to you							
			District When Case number, if known							
	Do you rent your	No.	Go to line 12. Has your landlord obtained an eviction judgment against you and do you want to stay in your							
	residence?	Yes.	residence?							
	residence?	□ Yes.								

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CESAR E COELLAR

			Case number (if known)
irst Name	Middle Name	Last Name	

Part 3:

Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

No. Go to Part 4.

Yes. Name and location of business

Q, t Francototion.

Name of business, if any

SSAS Fraddo Dr.

Number Street

Van Mulik 16 60560
City State ZIP Code

Check the appropriate box to describe your business:

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

For a definition of small business debtor, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

No. I am not filing under Chapter 11.

- ☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
- Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4:

Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

No

☐ Yes. What is the hazard?

If immediate attention is needed, why is it needed? ___

Where is the property?

Number

Street

City

State

ZIP Code

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Debtor 1

CESAR COELLAR

rst	Name	Middle	Nan

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities

About Debtor 1	
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You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

L	I I am not required to receive a briefing ab	out
	credit counseling because of:	

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

J	I received a briefing from an approved credit
	counseling agency within the 180 days before
	filed this bankruptcy petition, and I received a
	certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

L	1	I am no	t required	to	receive	a	briefing	about
		credit o	counselina	be	ecause o	٠f		

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

■ Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1

CESAR COELLAR E

irst Name	Middle Name	

Case number (if known)

P	art 6: Answer These Que	stions for Reporting Purpose	s				
16.	What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b.					
		Yes. Go to line 17. 16b. Are your debts primarily money for a business or inve	y business debts? Businestment or through the oper	iness debts are de ation of the busin	ebts that you incurred to obtain ess or investment.		
		No. Go to line 16c. Yes. Go to line 17.					
		16c. State the type of debts you o	we that are not consumer of	debts or business	debts.		
17.	Are you filing under Chapter 7?	☐ No. I am not filing under Chap	oter 7. Go to line 18.	APA MONTO TORRORAN KAMANAN KAMANAN KAMININ ZARAKAN TARAKAN TARAKAN KAMININ KAMININ KAMININ KAMININ KAMININ KAM	encicle and an extensive and account of the members of the section		
- 5.4 650	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes. I am filing under Chapter administrative expenses a No	7. Do you estimate that aft are paid that funds will be a	er any exempt pro	operty is excluded and ute to unsecured creditors?		
18.	How many creditors do you estimate that you owe?	☐ 1-49 ☑ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	į	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000		
	How much do you estimate your assets to be worth?	■ \$0-\$50,000 ■ \$50,001-\$100,000 ■ \$100,001-\$500,000 ■ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	ilion [\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
	How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 m \$100,000,001-\$500 r	llion (hillion (\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
Pa	rt 7: Sign Below	_ \$655,567 \$1 mmon	- \$100,000,001-\$0001) (RI) (1)	Wore than \$50 billion		
Fo	r you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
		I understand making a false statem with a bankruptcy case can result in 18 U.S.C. \$\\$ 152 1341, 1519, and	n fines up to \$250,000, or ii i 3571.	or obtaining money mprisonment for u	y or property by fraud in connection up to 20 years, or both.		
		Signature of Debtor 1	Part Assistantian	Signature of Del	btor 2		
		Executed on 10/17/2016 MM / DD / YYY		Executed on	M / DD / YYYY		

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Debtor 1

CESAR COELLAR Ε

First Name Middle Name Case number (if known)_

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page.

The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious acconsequences? No Yes	ction with long-term financial and legal
Are you aware that bankruptcy fraud is a serious crime inaccurate or incomplete, you could be fined or imprison. No	· · · · · · · · · · · · · · · · · · ·
Did you pay or agree to pay someone who is not an at ☑ No ☑ Yes. Name of Person	
By signing here, I acknowledge that I understand the relation have read and understood this notice, and I am aware attorney may cause me to lose my rights or property if	that filing a bankruptcy case without an
S/gnature) of Debtor 1	Signature of Debtor 2
Date 10/17/2016 MM / DD / YYYY	Date MM / DD / YYYY
Contact phone	Contact phone
Cell phone 630-731-1080	Cell phone
Email address cesarcoellar@aol.com	Email address

Case 16-33186 Doc 1 Filed 10/18/16 Entered 10/18/16 13:06:52 Document Page 8 of 33 Fill in this information to identify your case and this filing: CESAR COELLAR COFL Debtor 1 First Name Debtor 2 (Spouse, if filing) First Name Middle Name United States Bankruptcy Court for the: _____ District of _ ☐ Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put Single-family home the amount of any secured claims on Schedule D: 5575 FIELDS DR Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description ☐ Condominium or cooperative Current value of the Current value of the Manufactured or mobile home portion you own? entire property? 640000 -640000 Investment property YORKVILLE 60560 IL Describe the nature of your ownership ☐ Timeshare City State ZIP Code interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one. **KENDALL** Debtor 1 only Debtor 2 only County Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: If you own or have more than one, list here: What is the property? Check all that apply Do not deduct secured claims or exemptions. Put Single-family home the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the Manufactured or mobile home entire property? portion you own? Investment property Describe the nature of your ownership ☐ Timeshare City State ZIP Code

Official Form 106A/B

County

Debtor 1 and Debtor 2 only

At least one of the debtors and another

property identification number:

Debtor 1 only
Debtor 2 only

Who has an interest in the property? Check one.

Other information you wish to add about this item, such as local

interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Check if this is community property

(see instructions)

ebtor __ 1	First Name Middle Name Last Name			
			to Assessment of the control of the	
		What is the property? Check all that apply.	Do not deduct secured cl	
1.3.		Single-family home	the amount of any secure Creditors Who Have Clair	
	Street address, if available, or other description	Duplex or multi-unit building		
		Condominium or cooperative	Current value of the entire property?	portion you own?
		Manufactured or mobile home	ostaro proporty :	
		Land	\$	\$
		Investment property		
	City State ZIP Code	Timeshare	Describe the nature of interest (such as fee	
		Other	the entireties, or a lif	
		Who has an interest in the property? Check one.		
		Debtor 1 only		
	County	Debtor 2 only		
		Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
		At least one of the debtors and another	(see instructions)	
		Other information you wish to add about this its property identification number:		
		l of your entries from Part 1, including any entrienere		\$
7.64 (196 <u>1)</u>	Describe Your Vehicles			
you o	own, lease, or have legal or equitable interes that someone else drives. If you lease a vehicle	et in any vehicles, whether they are registered or a se, also report it on Schedule G: Executory Contracts or motorcycles		3
you o own: Cars,	own, lease, or have legal or equitable interes that someone else drives. If you lease a vehicle vans, trucks, tractors, sport utility vehicles,	e, also report it on Schedule G: Executory Contracts		S
you o own: Cars,	own, lease, or have legal or equitable interes that someone else drives. If you lease a vehicle vans, trucks, tractors, sport utility vehicles,	e, also report it on Schedule G: Executory Contracts		S
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you o own: Cars, Var	own, lease, or have legal or equitable interes that someone else drives. If you lease a vehicle vans, trucks, tractors, sport utility vehicles, o	e, also report it on <i>Schedule G: Executory Contracts</i> . , motorcycles	and Unexpired Leases.	
you o own: Cars, Var	own, lease, or have legal or equitable interes that someone else drives. If you lease a vehicle vans, trucks, tractors, sport utility vehicles,	e, also report it on Schedule G: Executory Contracts of motorcycles Who has an interest in the property? Check one.	and Unexpired Leases. Do not deduct secured cla	ims or exemptions. Put
you o own: Cars, Var	own, lease, or have legal or equitable interes that someone else drives. If you lease a vehicle vans, trucks, tractors, sport utility vehicles, o	who has an interest in the property? Check one.	and Unexpired Leases. Do not deduct secured clathe amount of any securer Creditors Who Have Clain	ims or exemptions. Put d claims on Schedule D. ns Secured by Property.
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you o own: Cars, Var No	own, lease, or have legal or equitable interest that someone else drives. If you lease a vehicle vans, trucks, tractors, sport utility vehicles, ones Make: Model: Year:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any secured Creditors Who Have Claim	ims or exemptions. Put d claims on Schedule D ns Secured by Property. Current value of th
you o own: Cars, Mark No	own, lease, or have legal or equitable interesthat someone else drives. If you lease a vehicle vans, trucks, tractors, sport utility vehicles, ones Make: Model: Year: Approximate mileage:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured clathe amount of any secured Creditors Who Have Claim	ims or exemptions. Put d claims on Schedule D ns Secured by Property. Current value of tl
you o own: Cars, Mark No	own, lease, or have legal or equitable interesthat someone else drives. If you lease a vehicle vans, trucks, tractors, sport utility vehicles, ones Make: Model: Year: Approximate mileage:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured clathe amount of any secured Creditors Who Have Claim	ims or exemptions. Put d claims on Schedule D ns Secured by Property. Current value of tl
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information:	☐ Check if this is community property (see instructions) Who has an interest in the property? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any securer Creditors Who Have Claim	sims or exemptions. Put d claims on Schedule D: ns Secured by Property.
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	Debtor 1 and Debtor 2 only	Current value of the	ent e e esta de la companya de la c
			Current value of th
	☐ At least one of the debtors and another	ontains proporty.	portion you own?
information:			portion you own:
		•	\$
	Check if this is community property (see instructions)	4	4
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another		
STATE OF THE STATE	☐ Check if this is community property (see instructions)	\$	\$
	,		
have more than one, list here:			
have more than one, list here:	Who has an interest in the property? Check one.	Do not deduct secured clai	ms or exemptions. Put
have more than one, list here:	, and the second	the amount of any secured	claims on Schedule D:
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	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any secured Creditors Who Have Claim. Current value of the	claims on Schedule D: s Secured by Property. Current value of the
	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	the amount of any secured Creditors Who Have Claim	claims on Schedule Das s Secured by Property.
		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another	Debtor 1 only Debtor 2 only Debtor 2 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another the amount of any secured Creditors Who Have Claim Current value of the entire property?

5.

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Part 3: **Describe Your Personal and Household Items**

Do	o you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims
		or exemptions.
6.	Household goods and furnishings	
	Examples: Major appliances, furniture, linens, china, kitchenware	
		r.
	Yes. Describe. FURNITURE BATDRON SET FAMILY RUN SET LIVING RUN, BREAKFATS TABLE	\$
7.	Electronics	•••
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
	□ No □ Yes. Describe	\$
8.	Collectibles of value	hot
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	☑ No ☐ Yes. Describe	\$
9.	Equipment for sports and hobbies	. >
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	2 No	n haling
	Yes. Describe	\$
10.	Firearms	
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment No	···
	Yes. Describe	\$
	Clothes	4
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No	
	Yes. Describe	\$
12.	Jewelry	
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
	✓ No ☐ Yes. Describe	\$
	Non-farm animals Examples: Dogs, cats, birds, horses	
	□ No	
	Yes. Describe	\$
	Any other personal and household items you did not already list, including any health aids you did not list	
	No No	
	Yes. Give specific information.	\$
	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$5600

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_	4.
	2.54

Describe Your Financial Assets

	y legal or equitable interest in			Current value of the portion you own? Do not deduct secured class or exemptions.	aims
16. Cash <i>Examples:</i> Money you	ı have in your wallet, in your hoi	me, in a safe deposit box, and on hand when you file	your petition		
☐ No ☑ Yes			ash:	s 8	30
		Se	301,	Φ	_
17. Deposits of money Examples: Checking, and others	savings, or other financial accor	unts; certificates of deposit; shares in credit unions, b nultiple accounts with the same institution, list each.	rokerage houses,		
☐ No					
Yes		Institution name:			
	17.1. Checking account:	BANK OF AMERICA		s -64	Ю
	17.2. Checking account:	BANK OF AMERICA		s -12	30
	17.3. Savings account:			\$	_
	17.4. Savings account:			\$	-
	17.5. Certificates of deposit:			\$	_
	17.6. Other financial account:			\$	_
	17.7. Other financial account:			\$	_
	17.8. Other financial account:			\$	
	17.9. Other financial account:			\$	
				Ψ	_
	or publicly traded stocks investment accounts with broken Institution or issuer name:	erage firms, money market accounts			
				\$	_
				\$	_
				\$	
19. Non-publicly traded s an LLC, partnership,		rated and unincorporated businesses, including a	ın interest in		
No No	Name of entity:		of ownership:		
Yes. Give specific information about		09		\$	
them		09	/0	\$	
		0,	%	\$,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

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First Name	Middle Name	Last Name	rage 13 0pggnamer (minum)	
Sovernment and corp	orate bonds and oth	ner negotiable and non-neg	gotiable instruments	
legotiable instruments Ion-negotiable instrum	include personal che ents are those you ca	cks, cashiers' checks, promisionnot transfer to someone by	ssory notes, and money orders. signing or delivering them.	
✓ No Yes. Give specific information about them	Issuer name:			\$
				- \$
		***************************************	1999	- \$
detirement or pensionexamples: Interests in IINoYes. List each account separately.		01(k), 403(b), thrift savings a	accounts, or other pension or profit-sharing pla	ns
ассочні зерагалету.	,,			_
	401(k) or similar plan:		P-4914MANATA	_ \$
	Pension plan:	***************************************		\$
	IRA:	10************************************		_ \$
	Retirement account:			\$
	Keogh:			
	Additional account:			\$
	Additional account:			_ \$
ecurity deposits and property of all unused fixamples: Agreements wompanies, or others	deposits you have m	nade so that you may continu d rent, public utilities (electric	ue service or use from a company c, gas, water), telecommunications	
No				
] Yes	Ins	stitution name or individual:		
	Electric:			\$
	Gas:	MANUAL TO THE TOTAL THE TO		\$
	Heating oil:			\$
		tal unit:		\$
	Prepaid rent:			\$
	Telephone:			\$
	Water:			\$
	Rented furniture:	······································		\$
	Other:			Ψ

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

☐ Yes	Issuer name and description:	
		\$
		\$
		\$

☑ No

Debtor 1	CESAR 16-331 First Name Middle N		COEILEO 10/18/16 RNAME DOCUMENT	Entered 10/18/16 Page 14 of Signumber (13:06:52 (known)	Desc Main
1 Interest	te in an advection IDA	in an account	in a qualified ADI E area	gram, or under a qualified sta		
	C. §§ 530(b)(1), 529A(b			gram, or under a quaimed sta	te tuition progr	am.
🗹 No						
Yes		Institution name	e and description. Separat	ely file the records of any intere	sts.11 U.S.C. §	521(c):
						•
						<u> </u>
					~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	<b>—</b>
5. Trusts, e exercisa	equitable or future int able for your benefit	erests in prope	erty (other than anything	listed in line 1), and rights or	powers	
No No						
	. Give specific			n kan diga at diga min managan ya samana samanan samana saman managa min sa s	meneral contract and the second contract and the secon	and the second of the complete con-
intor	mation about them					\$
6. Patents	. copyrights, tradema	rks, trade secre	ets, and other intellectua	l property		
			roceeds from royalties and			
No No						
	Give specific	one and the second seco	on or former themselve former verifies are services and a service of the service and any top and	уминтируну очолого очолого от того очолого того честь общей. Ил бого в И. И. Монер Минеро, Технолого общейну цуул, долго	**************************************	Principal and American State (State (
intori	mation about them	an annowar in a serial companyation and a separate companyation part is separate particular.	and the management and the second of the	THE STATE OF THE S	P 1000 V 100 1175 1175 1150 1150 1150 1150 1150	\$
/ License	es, franchises, and oth	er general inta	naihles			
				oldings, liquor licenses, profess	ional licenses	
No No				- ' '		
☐ Yes.	Give specific	defined (A in Them 11 configure by There yes company (15 de 16	asertomose neet annotes ento messo plantiga to sellatino to objector service e o o o magazinamento, to objecto	**************************************	rena ar a renerena estendo un aprecipio (martina) qui françand que de partina este de la compania de la frança	TO COMPANY CONTRACTOR
infori	mation about them					\$
oney or p	property owed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
.Tax refu	nds owed to you					
No No		£1001-000-000	erinter handriette til det til se her med det til handriet med her med stellen og som gifte som og som en skri	1980 er er krestlikt kolonik omståre kressin har degglickelig om måg mygde mygdeggreg mygneggen, och og		
	Give specific information about them, including v			A Color	Federal:	\$
	you already filed the re-	turns			State:	\$
	and the tax years			WANT OF VIA	Local:	\$
		L	and the control of th	The second secon		
. Family s						
	s: Past due or lump sur	n alimony, spou	sal support, child support,	maintenance, divorce settleme	nt, property setti	ement
No No		g-market market market	TT VANDORANA TOTTO FOR A FORM ATTEMATICATION OF THE ANGEL AND WAS AND A TOTAL AND AND A TO	w someow meanwrith and a 1886 i Meisel Serbe allowings a sait i finn a research ann ann ann de sanai Meiseg.		
	Give specific information	on			Alimony:	\$
		And A responsible to		To the second se	Maintenance:	\$
		Name of the second			Support:	\$
		*spinor and a subblished		Laborate Control of the Control of t	Divorce settlement:	
				SALVE TO THE SALVE	roperty settlement	
Other an	nounts someone owes		merena har 1 i 1700/milyot akkilik 6 i i i i i i i i i i i i i i i i i i	18-2 (Microbial Solidous Admiras) edited. Microbial solidos Anthropico (Solidos Especial Solidos Especial So		
Example	s: Unpaid wages, disab	ility insurance pa	ayments, disability benefit	s, sick pay, vacation pay, work	ers' compensation	on,
534 v.	Social Security benef	tits; unpaid loans	s you made to someone e	se		
☑ No	Give specific informatio		THE STREET VISION IN STREET IN STREET	tar tiista tarak isal a tiinad, katantiina qakhillana qarjaa kijiki jaayay jalikan tipingan ayyayaya saan yakyike say.	The telephone of the second	MALE REMOVED TO STATE OF THE ST
<b>—</b> 1€\$. ¹	оме ѕрестс тогтацо	<b>!!</b>				<b>\$</b>
		France Contract	ed Cystere (in Note in the Property of the control of the monte of the control of	бет баст те однодне метоне по можение те темпера на применения применения да установа у се можену се можену му	Courte or A month on each following of the first courte or a second or courte or	

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•	Tust Name Whose Name	Last Natife		
	s in insurance policies	co: boolth covings assount (LIS	SA); credit, homeowner's, or renter's insurance	
☑ No	s. Health, disability, of the insuran	ce, nealth savings account (ma	bA), credit, nomeowners, or renters insurance	
Yes.	Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
				\$
				\$
				\$
If you are	rest in property that is due you e the beneficiary of a living trust, e because someone has died.		rance policy, or are currently entitled to receive	
No No		. PROTECTION		
Yes.	Give specific information			
				<b>\$</b>
	gainst third parties, whether or s: Accidents, employment dispute:	•	or made a demand for payment sue	
	Describe each claim	er welten kromen de kromen de eenste eenste kromen gegregen kromen kromen de eenste kromen in zeen de eenste d		A. A
		tis 129 Ki Koolee indikkin koolekka ooki Madel Wadel Wadel Wadel ka koole Michel koole in koolee in ka ji ka j	See or a track of the second and a second account of the second ac	\$
34. Other co to set of No	ntingent and unliquidated claim f claims	s of every nature, including	counterclaims of the debtor and rights	
	Describe each claim.	183 г. был ден этог намедический менен том поменть законаную не на състава на том на състава на населения на н		
		Notice at the order of the state of the stat		\$
	ncial assets you did not already			
No Yes.	Give specific information			\$
36. Add the	dollar value of all of your entries	from Part 4, including any e	entries for pages you have attached	
IOI FAIL	. Write that humber here			3
Part 5:	Describe Any Business-R	elated Property You C	own or Have an Interest In. List any r	eal estate in Part 1.
37. <b>Do you o</b>	wn or have any legal or equitable	e interest in any business-re	lated property?	
🛮 No. G	o to Part 6.			
Yes. 0	Go to line 38.			
				Current value of the portion you own?  Do not deduct secured claims
_				or exemptions.
	receivable or commissions you	aiready earned		
No D Voc I	Describe	r atablististi raktli ratiolar shora more impequippiqi pri taksi Labbir Hari		
⊶ Yes. l				\$
39. Office ea	uipment, furnishings, and suppl	ies	TO SECTION OF STATE O	
Examples:			chines, rugs, telephones, desks, chairs, electronic devices	
☐ No	The state of the s	rri degelekkimenterrer de langer i trom de 1 halla (degel i 1 sekundena) erde de estifika de territoria.	and the parties of the control of th	"}
₩ Yes. [	COMPUTER, PF	INTER , DESK AND PF	RINTER, SCANER	\$

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade  11. Inventory 12. Interests in partnerships or joint ventures 13. No 14. Inventory 15. No 16. Yes. Describe	Debtor 1	CESAR 16		Dec 1 _{COE}	iled 10/18/16	Entered 10/18/16 1 Page 16 of Sumber of	L3:06:52	De	esc Main
Ves. Describe	1	First Name	Middle Name	Last Name	<del>Document</del>	rage 10 or 65	, <u> </u>		
Ves. Describe	40. Machine	ry, fixtures, eq	uipment, su	pplies you use i	n business, and to	ols of your trade			
Yes, Describe						•			
11 Inventory   No   Yes Describe   S	Yes.	Describe	THE CAME IS A SECURITY OF THE PARTY AND ADDRESS OF THE PARTY AND ADDRES	e announcement control of the contro	to an extensive of the state of	онного и принципант на принципант и принципант на принципант на принципант на принципант на принципант и принципант на принципан	t tankt a get for each of Fraguesia rayer agency, sign agency agency or agency	***************************************	<b>\$</b>
No   Yes Describe   S   S   S   S   S   S   S   S   S		i Lu	mentilean meneral sense ere ere ere ere.	der 1918 und Sternett, bertrett getret bis, all enkredigige også han sternet			. e		
Yes Describe									
Interests in partnerships or joint ventures  No No Yes Describe Name of entity:  State No		:	PROPER A SERVICE OF MAKERING A RATIO TO A SAFETY AND SAFETY AND SAFETY AND SAFETY AND SAFETY ASSAULT.	V \\ / *** **** * **********************	BOJANI, Januara ang kandig ti alipungangan ang pagama (antao ang pagama ya kana) apa ya na ya ya na ya ya na j	manyarana naki barri 1944 Mandad di Tus kasal kiji inkusa manjadja majayya nayya may zayana wasana 1944 ar mis kizidi.	and and to blood from the set of	. Comment of the comment	
No   Yes. Describe   Name of entity:	163.	Describe		de litre a companya y construent and a continuous and a transfer of the litre of th			more and the second		\$
No   Yes. Describe   Name of entity:	42. Interests	in partnership	os or joint ve	ntures					
S. Customer lists, mailing lists, or other compilations   No	M No								
S. Customer lists, malling lists, or other compilations  No No Yes Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes Do scribe	Yes. I	Describe	Name of entity	r:			% of ownerst	nip:	
\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$							%		\$
3. Customer lists, mailing lists, or other compilations   No				<u> </u>			%		\$
No   Yes Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?   No   Yes. Describe   \$					<u> </u>		%		\$
Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?   No		r lists, mailing	lists, or oth	er compilations					
No   Yes. Describe   S		Do vous linto i	maliida aass						
Yes. Describe									
4. Any business-related property you did not already list  No Yes. Give specific information			be		مستراه المستراه المستراع المستراه المستراه المستراع المست	\$ **Y \$VANSY to \$1.5 to an Andrew Constitution of principles propagation (ASSACTAN ASSACTANCE)	and an energy margine, by heligh of heliconstability of	***********	
Any business-related property you did not already list  No Yes. Give specific information			make or against the						\$
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Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.  Be Do you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No. Go to Part 7.  Yes. Go to line 47.  Current value of the portion you own?  Do not deduct secured claims or exemptions.  Farm animals  Examples: Livestock, poultry, farm-raised fish  No  Yes.		-	***************************************						\$
Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.  Be Do you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No. Go to Part 7.  Yes. Go to line 47.  Current value of the portion you own?  Do not deduct secured claims or exemptions.  Farm animals  Examples: Livestock, poultry, farm-raised fish  No  Yes.									\$
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36		CESAR	E		COELL		1		
[	Debtor 1	First Name	Middle Name		Last Name				
	Debtor 2								
(	Spouse, if filing	First Name	Middle Name		Last Name				
l	Inited States	Bankruptcy Court for the:	D	istrict of	<del></del>				
	Case number If known)	·			•				Check if this is an amended filing
0	fficial F	Form 106E/F	•						
S	chedi	ule E/F: Cred	litors '	Who	Have U	Insec	ured Clair	ns	12/15
Lis A/L cre nec any	of the other B: Property editors with eded, copy y additiona	party to any executory (Official Form 106A/B) partially secured claim	contracts or and on <i>Sch</i> e s that are lis t out, numbe e and case i	r unexpire edule G: E sted in Sci er the entri number (if	d leases that executory Con- hedule D: Cre les in the box known).	could resul tracts and ditors Who	lt in a claim. Also I Unexpired Leases Have Claims Secu	ist executor (Official For <i>red by Prop</i>	vith NONPRIORITY claims.  y contracts on Schedule  m 106G). Do not include any  erty. If more space is  ge to this page. On the top of
1		editors have priority uns							
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2.	List all of each claim nonpriority	listed, identify what type amounts. As much as po	of claim it is. ssible, list the	If a claim I e claims in	nas both priorit alphabetical o	ty and nonpr rder accordi	iority amounts, list the	nat claim her name. If vou	eparately for each claim. For e and show both priority and have more than two priority
:		claims, fill out the Continu planation of each type of o						n, list the oth	er creditors in Part 3.
	, ,		,			(	addon booker,	Total clair	m Priority Nonpriority
· 	1							and the state of the	amount amount
2.1	J	NNELLEY & SONS	COMP	_ Last 4	digits of acco	unt number		\$ 58,895	5.89 _{\$} \$
	Priority Cred	itor's Name WINDHAM OKWY			was the debt i		2014		
	Number	Street		- whiten	was the debt i	ncurreg?	W-1114 R		
	DOME	OVILLE IL	00440	- As of t	he date you fi	le, the claim	is: Check all that appl	<b>v</b> .	
	City	OVILLE IL	60446 ZIP Code	- 🔲 co	ntingent			,	
	,	3.2.0	ZIP Code		liquidated				
		rred the debt? Check one.		Dis Dis					
	■ Debtor				•				
	Debtor			Type	of PRIORITY (	unsecured o	claim:		
		1 and Debtor 2 only		🗹 Do	mestic support o	bligations			
		t one of the debtors and anot		☐ Ta:	xes and certain o	other debts yo	u owe the government		
	☐ Check	if this claim is for a com	munity debt	Cla	ims for death or	personal inju	ry while you were		
	Is the clai	m subject to offset?			oxicated				
	M No			<b>└</b> Oth	ner. Specify			-	
	Yes	Notes of the second	oraniamen necessarian en son d'enceções y esta	or V.A. control on versions and local control of the control of th	entandere met patent på sette til proteste for te	driftshalt of the miles of the same of		todo vácuros discontinuo strese co y	PROPERTY STATES OF THE STATE OF
2.2	Priority Credi	Y TRUCK LEASING	i	_ Last 4	digits of accor	unt number		\$ 38,371	.66
		APERVILLE DR		When	was the debt in	ncurred?	2015	1	
	Number	Street		- Asoft	he date vou fil	e. the claim	is: Check all that apply	<i>t</i> .	
	ROME	DVILLE IL	60446	***	ntingent	•			
	City	State	ZIP Code		iquidated				
	Who incu	rred the debt? Check one.		Dis	•				
	Debtor								
	Debtor	2 only			of PRIORITY U		:laim:		
		1 and Debtor 2 only			mestic support o				
	At least	one of the debtors and anoth	ner				u owe the government		
	Check	if this claim is for a comm	nunity debt		ims for death or xicated	personal injur	y while you were		
		m subject to offset?		Oth	er. Specify	·			
	Mo No								
	☐ Yes								

listing any entries on this page, number the	m beginning with 2.3, followed by 2.4, and so forth.	Total claim Priority amount	Nonpriority amount
PRAIRIE VIEW ORTHODONTICKS	Last 4 digits of account number	_{\$} 3,675.00 _{\$}	\$
Priority Creditor's Name 4777 ROUTE 71	When was the debt incurred?		
Number Street	4111/2001		
	As of the date you file, the claim is: Check all that apply.		
OSWEGO IL 60543	Contingent		
City State ZIP Code	<ul><li>✓ Unliquidated</li><li>✓ Disputed</li></ul>		
Who incurred the debt? Check one.	Space Dispated		
☑ Debtor 1 only	Type of PRIORITY unsecured claim:		
Debtor 2 only	Domestic support obligations		
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government		
At least one of the debtors and another	Claims for death or personal injury while you were		
Check if this claim is for a community debt	intoxicated  Other. Specify		
s the claim subject to offset?	— Other Opening		
No			
Yes			
NORTHWEST POOL SERVICE	TOO - MET CONTROL OF A STATE OF A	2 262 26	eg vege et enteranget even tot to de v ^{ege} t.
riority Creditor's Name	Last 4 digits of account number	\$_2,262.26\$	\$
12 W COUTRYSIDE PARKWAY	When was the debt incurred? 2014		
umber Street	when was the debt incurred?		
	As of the date you file, the claim is: Check all that apply.		
ORKVILLE IL 60560	☐ Contingent		
ity State ZIP Code	☑ Unliquidated		
/ho incurred the debt? Check one.	Disputed		
Debtor 1 only	Type of PRIORITY unsecured claim:		
Debtor 2 only	pane.		
Debtor 1 and Debtor 2 only	☐ Domestic support obligations ☐ Taxes and certain other debts you owe the government		
At least one of the debtors and another	Claims for death or personal injury white you were		
Check if this claim is for a community debt	intoxicated		
the claim authors to offeet?	U Other. Specify		
the claim subject to offset?  No			
1			
ROSARY HIGH SCHOOL		4 500	rittismi, markini an iy mana wasangawan sa
iority Creditor's Name	Last 4 digits of account number	\$\$	\$
•	When was the debt incurred?		
Imber Street 001 N EDGELAW DR			
	As of the date you file, the claim is: Check ail that apply.		
URORA IL 60506	Contingent		
ty State ZiP Code	<ul><li>✓ Unliquidated</li><li>☐ Disputed</li></ul>		
fho incurred the debt? Check one.	Lisputed		
Debtor 1 only	Type of PRIORITY unsecured claim:		
Debtor 2 only	☑ Domestic support obligations		
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government		
At least one of the debtors and another	Claims for death or personal injury while you were		
Check if this claim is for a community debt	intoxicated  Other. Specify	o kanana kananan sa pamanga papanganganganganga sakasanga kananaha kananan anamagayana, am day sa	99-492-40-40-40-412-412-412-412-412-412-412-412-412-412

Part 2:

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Last Name Document Page 20 of 33 **Œ≨\$€** 16-33186 Doc 1

**List All of Your NONPRIORITY Unsecured Claims** 

3.	Do any creditors have nonpriority un   No. You have nothing to report in the Yes					
1	nonpriority unsecured claim, list the cre	ditor separ ditor holds	rately for each claim	order of the creditor who holds each claim. If a creditor has For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no	t list cla	ims already
:					Tota	al claim
4.1	COMED			Last 4 digits of account number 5048	_	2,200.00
	Nonpriority Creditor's Name PO BOX 6111			When was the debt incurred?	\$	
:	Number Street CAROL STREAM	IL	60197			
	City	State	ZIP Code	As of the date you file, the claim is: Check all that apply.		
	1811 - 1			Contingent		
:	Who incurred the debt? Check one.  Debtor 1 only			<ul><li>✔ Unliquidated</li><li>Disputed</li></ul>		
	Debtor 2 only			a bisputed		
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another			Student loans		
	Check if this claim is for a commu	nity debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	;	
	☑ No ☐ Yes			Other. Specify		
4.2	FILDS OF FARM COLONY OV	WNERS/	THOMAS GRA	Last 4 digits of account number	\$	1,950.00
	Nonpriority Creditor's Name	······································		When was the debt incurred?		
	200 HILLCREST AVE					
	YORKVILLE	IL	60560	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			Unliquidated		
	Debtor 1 only			☐ Disputed		
	Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only  At least one of the debtors and another			☐ Student loans		
	Check if this claim is for a commun	nity debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts		
	☑ No			Other. Specify		
	☐ Yes		er teleprotitis visit de l'estatistis de l'aliques à historis de l'estatis, de mais à de l'estatis			
4.3	AMERICAN CREDIT ACCEPT		ett den vitte ett 16.6 milliote 600 milliote 1500 milliote 15.6 milliote	Last 4 digits of account number 1001	ennergen and and	11,000.00
	Nonpriority Creditor's Name PO BOX 4537			When was the debt incurred? 2015	Ψ	
	Number Street CARMEL	IN	46082			
	City	State	ZIP Code	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one.			Contingent		
	Debtor 1 only			✓ Unliquidated ☐ Disputed		
	Debtor 2 only			☐ Disputed		
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another			☐ Student loans		
	Check if this claim is for a commun	ity debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts  Other. Specify CAR LOAN		
	Yes			1		

### Your NONPRIORITY Unsecured Claims - Continuation Page

Aft	er listing any entries on this page, n	umber the	em beginning with	4.4, followed by 4.5, and so forth.	Total claim
	ILLINOIS TOLLWAY			Last 4 digits of account number	\$ 5,500.00
	Nonpriority Creditor's Name 2700 ODGEN AVE			When was the debt incurred?	
	Number Street DOWNERS GROVE	IL	60515	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.  Debtor 1 only	State	ZIP Code	Contingent Unliquidated Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another			Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Check if this claim is for a commuls the claim subject to offset?  ☑ No ☐ Yes	inity debt		Debts to pension or profit-sharing plans, and other similar debts  Other. Specify IL TOLLWAY  Other. Specify IL TOLLWAY	
	CITY OF CHICAGO/DEPART  Nonpriority Creditor's Name  P.O. BOX 88292	MENT	OF FINACE	Last 4 digits of account number 2880  When was the debt incurred?	\$_1,153.00
	Number Street		60600	As of the date you file, the claim is: Check all that apply.	
	CHICAGO  City  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a communication.		60680 ZIP Code	Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify PARKING TCKETS	
	Is the claim subject to offset?  No Yes	tt foresjundet i stole i kristensk fes e	lando esta la "como limitar se que podimido que sem tora a co, co s	27/14-15/14-15/15/16/16/16/16/16/16/16/16/16/16/16/16/16/	_{\$} 48,811.08
	REAL TIME RESOLUTIONS Nonpriority Creditor's Name			Last 4 digits of account number 9758  When was the debt incurred?	T-1011111111111111111111111111111111111
	PO BOX 1259		40450	•	
	OAKS  City  Who incurred the debt? Check one.  Debtor 1 only	PA State	19456 ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a commu			Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	:
	Is the claim subject to offset?  No Yes	my ucut		Debts to pension or profit-sharing plans, and other similar debts  Other. Specify	

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Part 4:

#### Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

Total claims from Part 1

- 6a. Domestic support obligations
- 6b. Taxes and certain other debts you owe the government
- 6c. Claims for death or personal injury while you were intoxicated
- 6d. Other. Add all other priority unsecured claims. Write that amount here.
- 6e. Total. Add lines 6a through 6d.
- **Total claims** from Part 2
- 6f. Student loans
- 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority
- 6h. Debts to pension or profit-sharing plans, and other similar debts
- 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total. Add lines 6f through 6i.

Total claim

- 6b.
- 6c.
- 6e.

Total claim

6f.

- 6g.
- 6h
- 6j.

List Others to Be Notified About a Debt That You Already Listed

NICO, Gos.	On which entry in Part 1 or Part 2 did you list the original creditor?
P.D BOX 190	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claim
$\Delta_{OCO_{City}}$ $L$ $\delta_{OSO}$	Last 4 digits of account number $\Omega \ni 2$
WFLTMON, WEINBON	On which entry in Part 1 or Part 2 did you list the original creditor?
323 W. Lakeside Ave	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
5017c 200	Part 2: Creditors with Nonpriority Unsecured Claims
Cleveland OH 4413 State ZIP Code	Last 4 digits of account number $\leq 8 28$
Rame	On which entry in Part 1 or Part 2 did you list the original creditor?
P.O. BOX 1548	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
LYNHWOOD WA 98046	Last 4 digits of account number
U.S. BONK Notions	On which entry in Part 1 or Part 2 did you list the original creditor?
15W030 N Frontoge Rd	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street SUITC 100	Part 2: Creditors with Nonpriority Unsecured Claims
BUNI PILOGE State ZIP Code	Last 4 digits of account number $6005$
Livebonge 6990M	On which entry in Part 1 or Part 2 did you list the original creditor?
P.O. BON 0615Z	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
Ch 1 C O S O S State ZIP Code	Last 4 digits of account number 0 8 5 4
SONTONAE USA COMSUNE.	On which entry in Part 1 or Part 2 did you list the original creditor?
P.O. 13px 961245	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
	Claims Part 2: Creditors with Nonpriority Unsecured
font worth the 76161 State ZIP Code	Last 4 digits of account number
OBT Glackore (VB).	On which entry in Part 1 or Part 2 did you list the original creditor?
1200 N. Milwokee Ave	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
6	Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _

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Fill	in this information to identify the	and the comment of th			
Dei	otor name <u>CSSAR</u> &	coellor	· · · · · · · · · · · · · · · · · · ·	uar .	
Uni	ted States Bankruptcy Court for the:		District of		
Cas	se number (if known):		(State) Chapter		
<u> </u>	***************************************			_	
					Check if this is an amended filing
Off	ficial Form 206G				<b>g</b>
Sc	hedule G: Execu	tory Contr	acts and U	nexpired Leases	12/15
Be a	s complete and accurate as possi	ble. If more space is	needed, copy and atta	ach the additional page, numbering t	he entries consecutively.
;	Does the debtor have any executor No. Check this box and file this form Yes. Fill in all of the information Form 206A/B).  List all contracts and unexpired le	orm with the court with below even if the cont	h the debtor's other sch racts or leases are liste	edules. There is nothing else to report d on <i>Schedule A/B: Assets - Real and i</i>	Personal Property (Official
	cist an contracts and unexpired ie		,	whom the debtor has an executory c	ontract or unexpired lease
2.1	State what the contract or lease is for and the nature of the debtor's interest				
	State the term remaining				
	List the contract number of				
	any government contract —				
2.2	State what the contract or lease is for and the nature			The state of the s	
	of the debtor's interest				
	State the term remaining				
	List the contract number of any government contract —	. St. STORTERS MINERAL LAND A LAND			
2.3	State what the contract or lease is for and the nature of the debtor's interest				
<b> </b>	State the term remaining				
	List the contract number of				
	any government contract —				
2.4	State what the contract or lease is for and the nature of the debtor's interest				
ar amount (187.), 1	State the term remaining		-		
	List the contract number of any government contract —				
2.5	State what the contract or lease is for and the nature of the debtor's interest				
	State the term remaining				
	List the contract number of		-		
	any government contract —	·			

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otor <u>COSAQ</u>	K (06))85	Case number (if known)
Additional Page if Dah	tor Una Maria Everanta y Continue	In Un
	tor Has More Executory Contract	is or Unexpired Leases  In the lines sequentially from the previous page.
List all contracts and unexpire		State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lea
		whom the debtor has an executory contract or unexpired lea
State what the contract or lease is for and the nature of the debtor's interest		
State the term remaining		
List the contract number of any government contract		
State what the contract or		
lease is for and the nature of the debtor's interest	######################################	
_		
State the term remaining  List the contract number of	WHITE CO. C.	**************************************
any government contract		
State what the contract or		
lease is for and the nature of the debtor's interest		
State the term remaining  List the contract number of		
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State what the contract or	wasten	
lease is for and the nature of the debtor's interest		THE ARMS TO SEE THE SECOND SEC
State the term remaining		
List the contract number of		
any government contract		
State what the contract or		
lease is for and the nature of the debtor's interest		**************************************
State the term remaining		***************************************
List the contract number of		
any government contract		
State what the contract or lease is for and the nature	Allers are a second of the sec	
of the debtor's interest		
State the term remaining	Warts	
List the contract number of any government contract		
State what the contract or lease is for and the nature		

of the debtor's interest

State the term remaining List the contract number of any government contract

		Doce	annem raj	yc z	-0 01 3	,		
Fill in this	s information to identify	your case:						
Debtend	CESAR	E	COELLAR					
Debtor 1	First Name	Middle Name	Last Name					
Debtor 2 (Spouse, if fil	ling) First Name	Middle Name	Last Name					
United Stat	tes Bankruptcy Court for the:	District of	***************************************					
Case numb	oer		u.			Check if	this is:	
(if Kilowii)							mended filing	
O.L 1	m 4001						oplement showing postpetition chapter ne as of the following date:	13
	Form 106I	- _				MM /	DD / YYYY	
Sche	dule I: You	ır income					12/15	
if you are s	correct information. If y separated and your spo	ou are married and not fi use is not filing with you, top of any additional pa	ling jointly, and ye do not include in	our s form	pouse is ation abo	living with ut vour sp	tor 2), both are equally responsible for you, include information about your spoouse. If more space is needed, attach a known). Answer every question.	us
1. Fill in yo	our employment ation.		Debtor 1				Debtor 2 or non-filing spouse	
attach a	ave more than one job, separate page with tion about additional ers.	Employment status	<ul><li>Employed</li><li>Not employ</li></ul>	/ed			☐ Employed ☐ Not employed	NAME OF THE PARTY
	part-time, seasonal, or ployed work.	Occupation	DESPACHE	R				
	tion may include student emaker, if it applies.	Oodapason	***************************************			······································		
		Employer's name	URGENT CO	DUR	IER	· · · · · · · · · · · · · · · · · · ·		
		Employer's address	74 C STON	EHIL	L RD			
			Number Street				Number Street	
			Marine de la companya della companya della companya de la companya de la companya della companya		***************************************			
			00000		00540		**************************************	
			OSWEGO	IL Sta	60543 te ZIP 0	ode	City State ZIP Code	
		How long employed the					10 MONTHS	
Part 2:	Give Details About	Monthly Income						
Estimate	e monthly income as of	the date you file this for	n. If you have noth	ing to	report for	any line, w	rite \$0 in the space. Include your non-filing	
If you or	unless you are separated. your non-filing spouse ha you need more space, at	ve more than one employe tach a separate sheet to the	er, combine the info	rmati	on for all	employers f	or that person on the lines	
					For I	Debtor 1	For Debtor 2 or non-filing spouse	
		ary, and commissions (be calculate what the monthly		2.	\$	3600	race to constitution of the production of the pr	
3. Estimat	te and list monthly over	time pay.		3.	+\$	0	+ \$	
4. Calcula	ite gross income. Add lir	ne 2 + line 3.		4	s	3600	\$	

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Debtor 1

**CESAR** 

			Fo	r Debtor 1	For Debtor 2 or non-filing spouse	
Сор	y line 4 here	<b>→</b> 4.	\$_	3,600.00	\$	
List	all payroll deductions:					
	Tax, Medicare, and Social Security deductions	5a.	\$	0	\$	
	Mandatory contributions for retirement plans	5b.	Ψ, \$	0	\$	
	Voluntary contributions for retirement plans	5c.	\$	0	\$	
	Required repayments of retirement fund loans	5d.	\$	0	\$	
	Insurance	5e.	\$	0	\$	
	Domestic support obligations	5f.	\$	0	\$	
	•		\$ \$	0	Ψ	
-	Union dues	5g.		0	·	
on.	Other deductions. Specify:	5h.	+\$_	·····	+ \$	
Add	I the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$	0	\$	
Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,600.00	\$	
List	all other income regularly received:					
8a.	Net income from rental property and from operating a business, profession, or farm					
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0	\$	
8b.	Interest and dividends	8b.	\$	0	\$	
8c.	Family support payments that you, a non-filing spouse, or a depende regularly receive	nt	,		· · · · · · · · · · · · · · · · · · ·	
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0	\$	
8d.	Unemployment compensation	8d.	\$	0	\$	
8e.	Social Security	8e.	\$	<u> </u>	\$	
	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistan that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	ce 8f.	\$	0	\$	
8g.	Pension or retirement income	8g.	\$	0	\$	
_	Other monthly income. Specify:	8h.	+ c	0	+\$	
	all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	. φ \$	0	\$	
	ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	3,600	\$	\$ 3,600.0
Inclu	e all other regular contributions to the expenses that you list in Schedule contributions from an unmarried partner, members of your household, yells or relatives.			ents, your room	mates, and other	Females
Do n	ot include any amounts already included in lines 2-10 or amounts that are r	not av	ailable	to pay expense	es listed in Schedule J.	
Spec	ify:			· · · · · · · · · · · · · · · · · · ·	11. <del>"</del>	\$
	the amount in the last column of line 10 to the amount in line 11. The that amount on the Summary of Your Assets and Liabilities and Certain S.				•	\$
						Combined

Entered 10/18/16 13:06:52 Case 16-33186 Doc 1 Filed 10/18/16 Page 28 of 33 Document Fill in this information to identify your case: CESAR E **COELLAR** Debtor 1 Check if this is: Debtor 2 An amended filing (Spouse, if filing) First Name Middle Name A supplement showing postpetition chapter 13 United States Bankruptcy Court for the: ___ expenses as of the following date: Case number MM / DD / YYYY Official Form 106J **Schedule J: Your Expenses** 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: **Describe Your Household** 1. Is this a joint case? Mo. Go to line 2. Yes. Does Debtor 2 live in a separate household? Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? ☐ No Dependent's relationship to Dependent's Does dependent live Yes. Fill out this information for Do not list Debtor 1 and Debtor 1 or Debtor 2 with you? age Debtor 2. each dependent.. ☐ No Doughter 16 Do not state the dependents' Yes Yes names. ☐ No MARIA COELLAR 20 Yes ☐ No PAULA COELLAR 21 ☐ No SILVANA QUEZADA ☑ Yes ☐ No ☐ Yes 3. Do your expenses include M No expenses of people other than Yes yourself and your dependents? Part 2: **Estimate Your Ongoing Monthly Expenses** Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of Your expenses such assistance and have included it on Schedule I: Your Income (Official Form 106I.) The rental or home ownership expenses for your residence. Include first mortgage payments and 1.500.00 any rent for the ground or lot. If not included in line 4: 0 Real estate taxes 4a 0 Property, homeowner's, or renter's insurance 4b. 0 Home maintenance, repair, and upkeep expenses 4c. 0 Homeowner's association or condominium dues

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Debtor 1

CESAR First Name

Ε

COELLAR

Case number (if known)

Your expenses Ō 5. Additional mortgage payments for your residence, such as home equity loans 6. Utilities: 120 6a. Electricity, heat, natural gas 25 6b Water, sewer, garbage collection 6b 220 Telephone, cell phone, Internet, satellite, and cable services 60 6c Other. Specify: 6d. 1600 Food and housekeeping supplies 7. 0 Childcare and children's education costs 8. 0 Clothing, laundry, and dry cleaning 9. 0 Personal care products and services 10 0 Medical and dental expenses 11. Transportation. Include gas, maintenance, bus or train fare. 100 Do not include car payments. 12. 0 Entertainment, clubs, recreation, newspapers, magazines, and books 13 0 Charitable contributions and religious donations 14 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 0 15a. Life insurance 15a. ō 15b. Health insurance 15b 0 15c. Vehicle insurance 15c. n 15d. Other insurance. Specify:____ 15¢. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 0 Specify: 16 Installment or lease payments: 0 17a. Car payments for Vehicle 1 17a 0 17b. Car payments for Vehicle 2 17h 0 17c. Other, Specify:_ 0 17d. Other. Specify:____ Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 0 Other payments you make to support others who do not live with you. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 0 20a. Mortgages on other property 20a. 0 20b. Real estate taxes 20b. 0 20c. Property, homeowner's, or renter's insurance 20c. 0 20d. Maintenance, repair, and upkeep expenses 20d. 20e. Homeowner's association or condominium dues 20e.

Page 30 of 33 Document **CESAR** E **COELLAR** Debtor 1 Case number (if known) First Name Middle Name 0 Other. Specify: Calculate your monthly expenses. 3,565.00 22a. Add lines 4 through 21. 22a 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 0 22b. 0 22c. Add line 22a and 22b. The result is your monthly expenses. 22c 23. Calculate your monthly net income. 3,600.00 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. 23b. 3,565.00 Copy your monthly expenses from line 22c above. 23b. 23c. Subtract your monthly expenses from your monthly income. 35 The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? ☐ No. OVERTINE AND LOOKING THE SECON JOB Yes.

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Fill in this information to identify your case:				
Debtor 1	CESAR	Е	COELLAR	
,	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court for	the: District	of	
Case number				
(If known)	***************************************		<del></del>	

## Official Form 108

# Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1:

**List Your Creditors Who Have Secured Claims** 

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the propert as exempt on Schedule C
Creditor's USA BANK name:	Surrender the property.	□ No
Description of SINGLE FAMILY HOME	Retain the property and redeem it.	Yes
property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]: OBTAIN A MODIFICATION OF MY LC	
Creditor's name:	Surrender the property.	No
	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
·	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
•	Retain the property and [explain]:	

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Debtor 1

CESAR E DOCUMERELLARAGE 32 01 33

Case number (# known)

Last Name

Last Name

## Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

essor's name:	☐ No
Description of leased roperty:	☐ Yes
essor's name:	□ No
escription of leased roperty:	<b>□</b> Yes
essor's name:	□ No
escription of leased roperty:	☐ Yes
essor's name:	□ No
escription of leased operty:	
essor's name:	□ No
escription of leased operty:	¥es
essof's name:	□ No
escription of leased operty:	☐ Yes
essor's name:	□ No
escription of leased operty:	Yes
3: Sign Below	
et penalty of perjury, I declare that I have indicated my ir conal property that is subject to an unexpired lease.	ntention about any property of my estate that secures a debt and any
<u> </u>	

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			Document	Page 33 of 33	
Debtor 1  Debtor 2 (Spouse, if filing)  United States B	First Name First Name First Name	Middle Name Middle Name	Last Name		
Case number (If known)		***************************************	<u></u>		<b></b>
<u>L</u>	-		·		☐ Check if this is an amended filing
Official	Form 106De	C			
Decla	aration Al	out an I	ndividua	l Debtor's Schedules	12/15
If two marri	ed people are filing to	gether, both are eq	ually responsible fo	or supplying correct information.	
optaining m	le this form whenever oney or property by t th. 18 U.S.C. §§ 152,	raud in connection	with a bankruptcy of	ended schedules. Making a false statement, conc case can result in fines up to \$250,000, or impris	cealing property, or sonment for up to 20

Jign below		
Did you pay or agree to pay someone who is	NOT an attorney to help you fill out bankruptcy forms?	
Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and	
	Signature (Official Form 119).	
		;
		;
Under negative of heriury. I declare that I have		
that they are true and correct.	read the summary and schedules filed with this declaration and	
× \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	*	1
Signature of Debtor 1	Signature of Debtor 2	!
10/20/20 H		
Date I(V) ) / (V) / VYYY	Date	1